| Fill in this information to identify your case: | | |
|---|---------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| SOUTHERN DISTRICT OF NEW YORK | _ | |
| Case number (if known) | _ Chapter you are filing under: | |
| | ☐ Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Identify Yourself | | |
|-----|--|--|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | |
| | Write the name that is on | Anne | |
| | your government-issued picture identification (for | First name | First name |
| | example, your driver's | T | |
| | license or passport). | Middle name | Middle name |
| | Bring your picture | Caldwell | |
| | identification to your meeting with the trustee. | Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) |
| | | | |
| 2. | All other names you have used in the last 8 years | | |
| | Include your married or maiden names. | | |
| | | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-4544 | |
| | | | |

Debtor 1 Anne T Caldwell

Case number (if known)

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|----|--|---|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ■ I have not used any business name or EINs. Business name(s) EINs | ☐ I have not used any business name or EINs. Business name(s) EINs |
| | | | |
| 5. | Where you live | 364 Lakeside Road | If Debtor 2 lives at a different address: |
| | | Newburgh, NY 12550 Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code |
| | | Orange | |
| | | County | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code |
| 6. | Why you are choosing this district to file for | Check one: | Check one: |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| | | | |

Debtor 1 Anne T Caldwell Pg 3 of 44

Case number (if known)

| 7. The chapter of the Bankruptcy Code you are choosing to file under | | | | | | | | | |
|--|---|-------|---|---|---|---|--|--|--|
| | choosing to file under | ☐ Cha | apter 7 | | | | | | |
| | | ☐ Cha | apter 11 | | | | | | |
| | | ☐ Cha | apter 12 | | | | | | |
| | | ■ Cha | apter 13 | | | | | | |
| В. | How you will pay the fee | | about how yo | ou may pay. Typi attorney is subm | cally, if you are paying the fee yo | k with the clerk's office in your local court for more details urself, you may pay with cash, cashier's check, or money alf, your attorney may pay with a credit card or check with | | | |
| | | | | | the fee in installments. If you choose this option, sign and attach the Application for Individuals to Page in Installments (Official Form 103A). | | | | |
| | | □ I | request that out is not req applies to yo | at my fee be wai uired to, waive y ur family size and | ved (You may request this option our fee, and may do so only if you are unable to pay the fee in | n only if you are filing for Chapter 7. By law, a judge may, ur income is less than 150% of the official poverty line tha installments). If you choose this option, you must fill out cial Form 103B) and file it with your petition. | | | |
| 9. | Have you filed for bankruptcy within the last 8 years? | ■ No. | i. | | | | | | |
| | | | District | | When | Case number | | | |
| | | | District | | When | Case number | | | |
| | | | District | | When | Case number | | | |
| 10. | Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ■ No | ;. | | | | | | |
| | | | Debtor | | | Relationship to you | | | |
| | | | District | | When | Case number, if known | | | |
| | | | Debtor | | | Relationship to you | | | |
| | | | District | | When | Case number, if known | | | |
| 11. | Do you rent your | ■ No. | Go to I | ine 12. | | | | | |
| | residence? | ☐ Yes | . Has yo | our landlord obta | ned an eviction judgment agains | t you and do you want to stay in your residence? | | | |
| | | | | No. Go to line 1 | 2. | | | | |
| | | | | Yes. Fill out <i>Init</i> bankruptcy peti | | Judgment Against You (Form 101A) and file it with this | | | |

Debtor 1 Anne T Caldwell Case number (if known)

| Par | Report About Any Bu | sinesses | You Own | as a Sole Propriet | or | | |
|-----|---|-----------|--|---|---|--|--|
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to | Part 4. | | | |
| | | ☐ Yes. | Name | and location of bus | iness | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name | of business, if any | | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Numb | Number, Street, City, State & ZIP Code | | | |
| | it to this petition. | | Checi | | x to describe your business: | | |
| | | | | Health Care Busin | ess (as defined in 11 U.S.C. § 101(27A)) | | |
| | | | | Single Asset Real | Estate (as defined in 11 U.S.C. § 101(51B)) | | |
| | | | | Stockbroker (as de | efined in 11 U.S.C. § 101(53A)) | | |
| | | | | Commodity Broke | r (as defined in 11 U.S.C. § 101(6)) | | |
| | | | | None of the above | | | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | deadlines | s. If you in s, cash-fl | court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure | | | |
| | For a definition of small | ■ No. | I am r | ot filing under Chap | ter 11. | | |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. | | | | |
| | | ☐ Yes. | I am f | iling under Chapter | 11 and I am a small business debtor according to the definition in the Bankruptcy Code. | | |
| Par | t 4: Report if You Own or | Have Any | Hazardo | ous Property or Any | Property That Needs Immediate Attention | | |
| 14. | Do you own or have any | ■ No. | | | | | |
| | property that poses or is | | | | | | |
| | alleged to pose a threat of imminent and identifiable hazard to | ☐ Yes. | What is | the hazard? | | | |
| | public health or safety? Or do you own any property that needs immediate attention? | | | liate attention is why is it needed? | | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is | s the property? | Number, Street, City, State & Zip Code | | |
| | | | | | · · · · · · · · · · · · · · · · · · · | | |

Debtor 1 Anne T Caldwell

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

| Deb | tor 1 Anne T Caldwell | 20 | F | Pg 6 of 44 Case number | (if known) | | | |
|------|---|--|--|--|---|--|--|--|
| Part | 6: Answer These Quest | ions for R | eporting Purposes | | | | | |
| | What kind of debts do you have? | 16a. | Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." | | | | | |
| | , | | ☐ No. Go to line 16b. | ,, | | | | |
| | | | Yes. Go to line 17. | | | | | |
| | | 16b. | Are your debts primarily bus | iness debts? Business debts are debts t ment or through the operation of the busi | | | | |
| | | | ☐ No. Go to line 16c. | | | | | |
| | | | ☐ Yes. Go to line 17. | | | | | |
| | | 16c. | State the type of debts you owe | e that are not consumer debts or busines: | s debts | | | |
| 17. | Are you filing under Chapter 7? | ■ No. | I am not filing under Chapter 7. | Go to line 18. | | | | |
| | Do you estimate that after any exempt property is excluded and | ☐ Yes. | | you estimate that after any exempt property able to distribute to unsecured creditors? | erty is excluded and administrative expenses | | | |
| | administrative expenses | | □ No | □ No | | | | |
| | are paid that funds will be available for distribution to unsecured creditors? | | Yes | | | | | |
| 18. | How many Creditors do | ■ 1-49 | | □ 1,000-5,000 | ☐ 25,001-50,000 | | | |
| | you estimate that you owe? | ☐ 50-99 |) | □ 5001-10,000 | 5 0,001-100,000 | | | |
| | owe: | □ 100-1 □ 200-9 | | ☐ 10,001-25,000 | ☐ More than100,000 | | | |
| 19. | How much do you estimate your assets to | □ \$0 - \$50,000 | | □ \$1,000,001 - \$10 million | □ \$500,000,001 - \$1 billion | | | |
| | be worth? | | 001 - \$100,000 | ☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million | ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion | | | |
| | | | ,001 - \$500,000 ,001 - \$1 million | □ \$100,000,001 - \$500 million | ☐ More than \$50 billion | | | |
| 20. | How much do you | □ \$0 - \$50,000 | | ☐ \$1,000,001 - \$10 million | ☐ \$500,000,001 - \$1 billion | | | |
| | estimate your liabilities to be? | | 001 - \$100,000 | □ \$10,000,001 - \$50 million | □ \$1,000,000,001 - \$10 billion | | | |
| | | □ \$100,001 - \$500,000 ■ \$500,001 - \$1 million | | ☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million | ☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion | | | |
| Part | 7: Sign Below | | | | | | | |
| For | you | I have ex | xamined this petition, and I decla | re under penalty of perjury that the inform | nation provided is true and correct. | | | |
| | | | | am aware that I may proceed, if eligible, ef available under each chapter, and I ch | | | | |
| | | If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). | | | | | | |
| | | I request | request relief in accordance with the chapter of title 11, United States Code, specified in this petition. | | | | | |
| | | bankrupt and 357 | tcy case can result in fines up to 1. | oncealing property, or obtaining money o \$250,000, or imprisonment for up to 20 years. | r property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519, | | | |
| | | | e T Caldwell Caldwell | Signature of Debtor | 2 | | | |
| | | | e of Debtor 1 | olynatale of Debior | - | | | |

Executed on

MM / DD / YYYY

Executed on *April 4, 2017* MM / DD / YYYY

Debtor 1 Anne T Caldwell Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Warren | Greher | Date | April 4, 2017 |
|-----------------|------------------------|---------------|-------------------------|
| Signature of | Attorney for Debtor | | MM / DD / YYYY |
| Warren G | reher | | |
| Printed name | | | |
| Greher La | w Offices, P.C. | | |
| Firm name | - | | |
| 1161 Little | Britain Road | | |
| Suite B | | | |
| | lsor, NY 12553 | | |
| Number, Street, | City, State & ZIP Code | | |
| Contact phone | 845-567-1002 | Email address | warrengreher@hvc.rr.com |
| 7174 | | | |
| Bar number & S | tate | | |

| | | | <u> </u> | |
|---------------------|--------------------------|-------------------|-------------|------------------------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Anne T Caldwell | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | SOUTHERN DISTRICT | OF NEW YORK | |
| Case number | | | | |
| (if known) | | | | Check if this is an amended filing |
| | | | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| • | | | |
|-----|--|-------------|----------------------------------|
| Pai | t 1: Summarize Your Assets | | |
| | | Your a | ssets of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 181,830.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 181,830.00 |
| Pai | t 2: Summarize Your Liabilities | | |
| | | | i abilities It you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 526,250.86 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 27,345.08 |
| | Your total liabilities | \$ | 553,595.94 |
| Pai | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 3,278.00 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 3,197.00 |
| Pai | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with yo | ur other sc | hedules. |
| 7. | ■ Yes What kind of debt do you have? | | |
| | | | |

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Anne T Caldwell

| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form |
|----|--|
| | 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14. |

5,218.00

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total claim | 1 |
|--|-------------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

| 11 000 | oo ogiii L | 7001 11100 | | Pa 10 of 44 | 7.40.00 | ivialii b | odinent |
|---|-------------------------|------------------------|-----------|---|-----------------------------|-------------|--|
| Fill in this informa | ation to identify | your case and th | is tiling | g: | | | |
| Debtor 1 | Anne T Calc | | | | | | |
| Dalata a O | First Name | Middle | Name | Last Name | | | |
| Debtor 2 Spouse, if filing) | First Name | Middle | Name | Last Name | | | |
| - | cruptov Court for | the SOUTHER | N DIST | RICT OF NEW YORK | | | |
| ornica Glates Barin | trupicy Court for | the. Goothier | | THE TOTAL TOTAL | | | |
| Case number | | | | | | | ☐ Check if this is a amended filing |
| S.C | 4004/5 | | | | | | |
| Official For | | _ | | | | | |
| Schedule | · A/B: Pi | roperty | | | | | 12/15 |
| Do you own or have No. Go to Part 2 ■ Yes. Where is the other of the No. | | juitable interest in a | ny resid | dence, building, land, or similar property? | | | |
| 1.1 | | | What | t is the property? Check all that apply | | | |
| 363 CR 49 | | aninti an | | Single-family home | | | ims or exemptions. Put |
| Street address, if a | available, or other des | сприоп | | Condominium or cooperative | | | I claims on <i>Schedule D:</i> as <i>Secured by Property</i> . |
| | | | | Manufactured or mobile home | Current valu | o of the | Current value of the |
| Middletown | NY NY | 10940-0000 | | Land | entire prope | | portion you own? |
| City | State | ZIP Code | | Investment property | | \$0.00 | \$0.00 |
| | | | | | Describe the | nature of y | our ownership interest |
| | | | | | (such as fee a life estate) | | incy by the entireties, o |
| | | | | has an interest in the property? Check one Debtor 1 only | Tenant in | | |
| Orange | | | | | | | |
| County | | | | | | | |
| | | | | At least one of the debtors and another | Check if | | munity property |
| | | | | er information you wish to add about this iten | , | , | |
| Add the dollar | value of the pe | ortion you own to | r all of | your entries from Part 1, including any | entries for | | |
| | | | | er here | | > | \$0.00 |
| art 2: Describe Yo | our Vehicles | | | | | | |

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Pg 11 of 44 Case number (if known) Debtor 1 Anne T Caldwell 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Nissan Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: Sentra Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2004 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: 205,000 entire property? Debtor 1 and Debtor 2 only portion you own? Other information: At least one of the debtors and another Poor condition \$300.00 \$300.00 Location: 364 Lakeside Road, ☐ Check if this is community property (see instructions) Newburgh NY 12550 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$300.00 pages you have attached for Part 2. Write that number here...... Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... Furniture at residence, no one piece worth more than \$200 \$1,500.00 Location: 364 Lakeside Road, Newburgh NY 12550 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games □ No Yes. Describe..... Television, computer and printer \$1,000.00 Location: 364 Lakeside Road, Newburgh NY 12550 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe.....

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Main Document

17-35538-cgm

17-35538-cgm Doc 1 Filed 04/04/17 Entered 04/04/17 09:48:33 Main Document Pg 12 of 44 Case number (if known) Debtor 1 Anne T Caldwell 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☐ No Yes. Describe..... clothing located at debtor's residence \$1.500.00 Location: 364 Lakeside Road, Newburgh NY 12550 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver Yes. Describe..... Miscellaneous jewelry, watch \$1.500.00 Location: 364 Lakeside Road, Newburgh NY 12550 13. Non-farm animals Examples: Dogs, cats, birds, horses □ No Yes. Describe..... Three cats \$30.00 Location: 364 Lakeside Road, Newburgh NY 12550 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$5,530.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ■ No □ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes.....

Official Form 106A/B Schedule A/B: Property page 3

Chase Bank

17.1. Checking

\$1,000.00

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Official Form 106A/B Schedule A/B: Property page 4

☐ Yes. Give specific information about them...

Pg 14 of 44 Case number (if known) Debtor 1 Anne T Caldwell 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ■ No ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ Yes. Name the insurance company of each policy and list its value. Beneficiary: Surrender or refund Company name: value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$176,000.00 for Part 4. Write that number here...... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6.

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Official Form 106A/B Schedule A/B: Property page 5

☐ Yes. Go to line 38.

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17-35538-cgm Doc 1 Filed 04/04/17 Entered 04/04/17 09:48:33 Main Document Pg 15 of 44 Debtor 1 Anne T Caldwell Case number (if known) Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00

| Part | 8: List the Totals of Each Part of this Form | | | | |
|------|---|-----|--------------|------------------------------|--------------|
| 55. | Part 1: Total real estate, line 2 | | | | \$0.00 |
| 56. | Part 2: Total vehicles, line 5 | | \$300.00 | | |
| 57. | Part 3: Total personal and household items, line 15 | | \$5,530.00 | | |
| 58. | Part 4: Total financial assets, line 36 | | \$176,000.00 | | |
| 59. | Part 5: Total business-related property, line 45 | | \$0.00 | | |
| 60. | Part 6: Total farm- and fishing-related property, line 52 | | \$0.00 | | |
| 61. | Part 7: Total other property not listed, line 54 | + _ | \$0.00 | | |
| 62. | Total personal property. Add lines 56 through 61 | _ | \$181,830.00 | Copy personal property total | \$181,830.00 |

Official Form 106A/B Schedule A/B: Property page 6

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$181,830.00

| mation to identify your | case: | | |
|--------------------------|---------------------------------------|--|---|
| Anne T Caldwell | | | |
| First Name | Middle Name | Last Name | |
| | | | |
| First Name | Middle Name | Last Name | |
| ankruptcy Court for the: | SOUTHERN DISTRICT | OF NEW YORK | |
| | | | ☐ Check if this is an amended filing |
| | Anne T Caldwell First Name First Name | First Name Middle Name First Name Middle Name | Anne T Caldwell First Name Middle Name Last Name First Name Middle Name Last Name |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim Specific la | | Specific laws that allow exemption |
|--|---|---|---|------------------------------------|
| | Copy the value from Schedule A/B | Che | ck only one box for each exemption. | |
| 2004 Nissan Sentra 205,000 miles Poor condition | \$300.00 | | \$300.00 | Debtor & Creditor Law § 282(1) |
| Location: 364 Lakeside Road, Newburgh NY 12550 Line from Schedule A/B: 3.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Furniture at residence, no one piece worth more than \$200 | \$1,500.00 | | \$1,500.00 | NYCPLR § 5205(a)(5) |
| Location: 364 Lakeside Road, Newburgh NY 12550 Line from Schedule A/B: 6.1 | 100% of fair market value, up to any applicable statutory limit | | 100% of fair market value, up to any applicable statutory limit | |
| Television, computer and printer Location: 364 Lakeside Road, | \$1,000.00 | | \$1,000.00 | NYCPLR § 5205(a)(5) |
| Newburgh NY 12550 Line from Schedule A/B: 7.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| clothing located at debtor's residence | \$1,500.00 | • | \$1,500.00 | NYCPLR § 5205(a)(5) |
| Location: 364 Lakeside Road, Newburgh NY 12550 Line from Schedule A/B: 11.1 | | | 100% of fair market value, up to any applicable statutory limit | |

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Debtor 1 Anne T Caldwell Case number (if known)

| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemption |
|----|--|--------------------------------------|--------|---|------------------------------------|
| | | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| | Miscellaneous jewelry, watch Location: 364 Lakeside Road, | \$1,500.00 | | \$1,500.00 | NYCPLR § 5205(a)(6) |
| | Newburgh NY 12550 Line from Schedule A/B: 12.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Checking: Chase Bank Line from Schedule A/B: 17.1 | \$1,000.00 | | \$1,000.00 | NYCPLR § 5205(a)(9) |
| | Line Holli Golleddie PAB. 11.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | 403(b): Unknown Line from Schedule A/B: 21.1 | \$35,000.00 | | \$58,333.33 | Debtor & Creditor Law § 282(2)(e) |
| | Line Holli Schedule A/B. 21.1 | | | 100% of fair market value, up to any applicable statutory limit | 202(2)(6) |
| | 403(b): Unknown Line from Schedule A/B: 21.2 | \$35,000.00 | | \$58,333.33 | Debtor & Creditor Law § 282(2)(e) |
| | Ellie Holli Golleddie PAB. 2112 | | | 100% of fair market value, up to any applicable statutory limit | 202(2)(0) |
| | 403(b): Unknown Line from Schedule A/B: 21.3 | \$35,000.00 | | \$58,333.33 | Debtor & Creditor Law § 282(2)(e) |
| | | | | 100% of fair market value, up to any applicable statutory limit | |
| | 403(b): Unknown Line from Schedule A/B: 21.4 | \$35,000.00 | | \$58,333.33 | Debtor & Creditor Law § 282(2)(e) |
| | Ellie Holli Golloddie 172. 2111 | | | 100% of fair market value, up to any applicable statutory limit | |
| 3. | Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every | | | led on or after the date of adjustme | nt.) |
| | No | | | | |
| | ☐ Yes. Did you acquire the property cover | ed by the exemption wi | thin 1 | ,215 days before you filed this case | ? |
| | □ No | | | | |
| | ☐ Yes | | | | |

| | | Pd 18 of 44 | | | |
|----------------|---|---|--|--|-----------------------------------|
| Fill | in this information to identify y | our case: | | | |
| Deb | otor 1 Anne T Caldw | /ell Middle Name Last Name | | - | |
| Deb | otor 2 | made Name | | | |
| (Spo | use if, filing) First Name | Middle Name Last Name | | - | |
| Unit | ted States Bankruptcy Court for the | ne: SOUTHERN DISTRICT OF NEW YORK | | _ | |
| Cas (if kno | e number own) | | | | if this is an led filing |
| Off | icial Form 106D | | | | |
| | | rs Who Have Claims Secure | ed by Proper | ty | 12/15 |
| is ne numb | eded, copy the Additional Page, fill per (if known). | e. If two married people are filing together, both are e it out, number the entries, and attach it to this form. (| | | |
| | any creditors have claims secured | ,, , , , | | | |
| | □ No. Check this box and submi □ | it this form to the court with your other schedules. ' | You have nothing else | to report on this form. | |
| | Yes. Fill in all of the information | on below. | | | |
| Par | List All Secured Claims | | 0.1 | 0.4 | 0.1.0 |
| for e | each claim. If more than one creditor has possible, list the claims in alphab | as more than one secured claim, list the creditor separate has a particular claim, list the other creditors in Part 2. As setical order according to the creditor's name. | Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| 2.1 | Bayview Loan Servicing | Describe the property that secures the claim: | \$503,250.86 | \$0.00 | \$503,250.86 |
| | Creditor's Name Attn Managing Member | 363 CR 49 Middletown, NY 10940 Orange County | | | |
| | 4425 Ponce De Leon Blvd - 5th Fl Miami, FL 33146 | As of the date you file, the claim is: Check all that apply. Contingent | | | |
| | Number, Street, City, State & Zip Code | Unliquidated | | | |
| Who | o owes the debt? Check one. | ☐ Disputed Nature of lien. Check all that apply. | | | |
| _ | Debtor 1 only Debtor 2 only | An agreement you made (such as mortgage or se car loan) | ecured | | |
| | Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | |
| _ | At least one of the debtors and anothe | | | | |
| | Check if this claim relates to a community debt | Other (including a right to offset) First Mort | gage | | |
| Date | e debt was incurred | Last 4 digits of account number 8817 | , | | |
| 2.2 | Hudson Valley FCU | Describe the property that secures the claim: | \$23,000.00 | \$0.00 | \$23,000.00 |
| | Creditor's Name | 363 CR 49 Middletown, NY 10940 Orange County | | | |
| | Attn President 137 Boardman Road Poughkeepsie, NY 12603 | As of the date you file, the claim is: Check all that apply. ☐ Contingent | | | |
| | Number, Street, City, State & Zip Code | Unliquidated | | | |
| Who | o owes the debt? Check one. | ☐ Disputed Nature of lien. Check all that apply. | | | |
| _ | Debtor 1 only Debtor 2 only | An agreement you made (such as mortgage or so car loan) | ecured | | |
| _ | Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | |
| | At least one of the debtors and anothe | | | | |
| | Check if this claim relates to a community debt | Other (including a right to offset) Second M. | lortgage | | |
| Date | e debt was incurred | Last 4 digits of account number 3L69 | | | |

Official Form 106D

| Debtor 1 | Anne T Caldw | ell ell | | Case number (if know) | |
|-----------|----------------------|----------------------------|-----------------------------------|-----------------------|----------|
| | First Name | Middle Name | Last Name | _ | |
| | | | | | |
| | | | | | |
| | | | | | ¬ |
| Add the | dollar value of your | entries in Column A on t | his page. Write that number here: | \$526,250.86 | ; |
| | | ır form, add the dollar va | lue totals from all pages. | \$526,250.86 | 3 |
| Write tha | at number here: | | | Ψ020,200.00 | ' |

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

| | • | | Pa 20 of 44 | | |
|--|---|--|--|---|--|
| Fill in this info | ormation to identify your | case: | | | |
| Debtor 1 | Anne T Caldwell | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States I | Bankruptcy Court for the: | SOUTHERN DISTRICT | OF NEW YORK | | |
| C | | | | | |
| Case number (if known) | | | | ПС | heck if this is an |
| | | | | - | nended filing |
| | | | | | , and the second |
| | rm 106E/F | | | | |
| Schedule | E/F: Creditors W | ho Have Unsect | ured Claims | | 12/15 |
| Schedule G: Exe Schedule D: Cre left. Attach the C | ecutory Contracts and Unexp ditors Who Have Claims Sec | ired Leases (Official Form of ured by Property. If more s | Also list executory contracts on Sched 106G). Do not include any creditors with pace is needed, copy the Part you need, on to report in a Part, do not file that Par | n partially secured claims , fill it out, number the ent | that are listed in ries in the boxes on the |
| Part 1: List | All of Your PRIORITY Un | secured Claims | | | |
| - | ditors have priority unsecure | d claims against you? | | | |
| No. Go to | o Part 2. | | | | |
| ☐ Yes. | | | | | |
| Part 2: List | All of Your NONPRIORIT | Y Unsecured Claims | | | |
| 3. Do any cred | ditors have nonpriority unsec | ured claims against you? | | | |
| ☐ No. You | have nothing to report in this p | art. Submit this form to the co | ourt with your other schedules. | | |
| Yes. | | | | | |
| unsecured c | claim, list the creditor separately | / for each claim. For each cla | der of the creditor who holds each claim aim listed, identify what type of claim it is. D 3.If you have more than three nonpriority u | o not list claims already incl | uded in Part 1. If more |
| | | | | | Total claim |
| 4.1 Disco | over Bank | Last 4 digit | s of account number | | \$10,000.00 |
| • | ority Creditor's Name | When week | the debt incurred? | | |
| | President New Albany Road | when was t | me debt incurred? | | |
| | Albany, OH 43054-3008 | 3 | | | |
| Numbe | r Street City State Zlp Code | As of the da | ate you file, the claim is: Check all that ap | oply | |
| Who in | curred the debt? Check one. | | | | |
| Deb | otor 1 only | ☐ Continge | ent | | |
| ☐ Deb | otor 2 only | ☐ Unliquida | ated | | |
| ☐ Deb | otor 1 and Debtor 2 only | ☐ Disputed | 1 | | |
| ☐ At le | east one of the debtors and and | , iiiCi | NPRIORITY unsecured claim: | | |
| ☐ Che | eck if this claim is for a com | • | | | |
| debt | | | ons arising out of a separation agreement o | or divorce that you did not | |
| _ | claim subject to offset? | report as pri | • | | |
| ■ No | | | pension or profit-sharing plans, and other | | |
| ☐ Yes | | Other. S | pecify consumer credit purchas | ses | |

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Case number (if know)

| First Hawaiian Bank | Last 4 digits of account number 6067 | \$9,695.00 |
|--|---|------------|
| Nonpriority Creditor's Name Attn President 999 Bishop St Honolulu, HI 96813 | When was the debt incurred? | |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt | Obligations arising out of a separation agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| ■ No | | |
| Yes | ■ Other. Specify Loan | |
| Integrated Med Professionals | Last 4 digits of account number 4890 | \$156.00 |
| Nonpriority Creditor's Name Attn President | When was the debt incurred? | |
| 532 Broadhollow Rd - Ste 142 | When was the dept incurred: | |
| Melville, NY 11747 | | |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| Debtor 1 only | Contingent | |
| ☐ Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| □ Yes | Other. Specify Medical services | |
| □ res | Other. Specify Medical Services | |
| Verizon Wireless | Last 4 digits of account number 6944 | \$643.07 |
| Nonpriority Creditor's Name Attn: President | When was the debt incurred? | |
| 133 Calkins Road | | |
| Rochester, NY 14623 | | |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| Debtor 1 only | Contingent | |
| Debtor 2 only | Unliquidated | |
| Debtor 1 and Debtor 2 only | Disputed | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| _ | | |
| ☐ Yes | Other. Specify consumer credit purchases | |

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Case number (if know)

| Debioi | Anne i Caldwell | | Case number (if know) | |
|--------------------------|---|--|--|-------------------------|
| 4.5 | Westchester Anesthesiologists | Last 4 digits of account numbe | er | \$5,700.00 |
| | Nonpriority Creditor's Name Attn President 800 Westchester Ave S-614 | When was the debt incurred? | 1/24/2012-1/27/2012 | |
| | Port Chester, NY 10573-1354 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the clair | m is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecu | red claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a se report as priority claims | paration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sha | ring plans, and other similar debts | |
| | Yes | Other. Specify Medical s | services | |
| 4.6 | White Plains Hospital Nonpriority Creditor's Name | Last 4 digits of account number | or <u>0698</u> | \$1,151.01 |
| | Attn President 41 E Post Road | When was the debt incurred? | 1/24/2012 | |
| | White Plains, NY 10601 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the clair | m is: Check all that apply | |
| | Debtor 1 only | O continuous | | |
| | Debtor 2 only | ☐ Contingent☐ Unliquidated | | |
| | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecu | red claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a se report as priority claims | eparation agreement or divorce that you did not | |
| | ■ No | ☐ Debts to pension or profit-sha | ring plans, and other similar debts | |
| | Yes | Other. Specify Medical s | services | |
| Part 3 | List Others to Be Notified About a D | Debt That You Already Listed | | |
| is try have notifi | ing to collect from you for a debt you owe to | someone else, list the original creditor hat you listed in Parts 1 or 2, list the act or submit this page. | t you already listed in Parts 1 or 2. For exampl in Parts 1 or 2, then list the collection agency Iditional creditors here. If you do not have add | here. Similarly, if you |
| | and Address al Management Services, LP | On which entry in Part 1 or Part 2 did you Line 4.4 of (Check one): | Depart 1: Creditors with Priority Unsecured Clair | ns |
| | President | | Part 2: Creditors with Nonpriority Unsecured 0 | Claims |
| | /2 South Ogden Street No, NY 14206-2317 | | | |
| | | Last 4 digits of account number | | |
| | and Address | On which entry in Part 1 or Part 2 did y | ou list the original creditor? | |
| | o Partnership President | Line 4.4 of (Check one): | Part 1: Creditors with Priority Unsecured Clair | |
| | rresident izon Way | | Part 2: Creditors with Nonpriority Unsecured 0 | Claims |
| Bask | ing Ridge, NJ 07920 | | | |
| | | Last 4 digits of account number | | |
| | and Address | On which entry in Part 1 or Part 2 did y | | |
| | rson Capital Systems LLC ox 23051 | Line 4.4 of (Check one): | Part 1: Creditors with Priority Unsecured Clair | |
| | mbus, GA 31902 | | Part 2: Creditors with Nonpriority Unsecured C | Claims |
| | | Last 4 digits of account number | | |
| | and Address essional Claims Bureau Inc. | On which entry in Part 1 or Part 2 did you Line 4.6 of (Check one): | ou list the original creditor? Part 1: Creditors with Priority Unsecured Clair | ns |
| Official F | Form 106 E/F Sch | nedule E/F: Creditors Who Have Unsecu | ured Claims | Page 3 of |

Debtor 1 Anne T Caldwell

Case number (if know)

Attn President 439 Oak Street Garden City, NY 11530

■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

0698

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Total Claim |
|-----------------------|-----|---|-----|-----------------|
| | 6a. | Domestic support obligations | 6a. | \$ 0.00 |
| Total claims | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ 0.00 |
| | 01 | On the Advance | 01 | Total Claim |
| Total | 6f. | Student loans | 6f. | \$ 0.00 |
| claims from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ 27,345.08 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ 27,345.08 |

| Fill in this infor | l in this information to identify your case: | | | | | | |
|---------------------|--|-------------------|-------------|---------------------------------|--|--|--|
| Debtor 1 | Anne T Caldwell | | | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | | |
| United States Ba | ankruptcy Court for the: | SOUTHERN DISTRICT | OF NEW YORK | | | | |
| Case number | | | | | | | |
| (if known) | | | | ☐ Check if this i amended filin | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company with | n whom you have the c | contract or lease | State what the contract or lease is for |
|-----|-----------|--------------|-----------------------|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.2 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.3 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.4 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.5 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | - |
| | | | | | |

| | | | Pa 25 of 44 | | |
|---------------------------------------|---|--|--|--|---|
| Fill in thi | is information to identify your | case: | | | |
| Debtor 1 | Anne T Caldwell | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | illing) First Name | Middle News | Loot Nome | | |
| (Spouse if, f | iling) First Name | Middle Name | Last Name | | |
| United St | tates Bankruptcy Court for the: | SOUTHERN DISTRICT | OF NEW YORK | | |
| Case nur | mber | | | | ☐ Check if this is an amended filing |
| | al Form 106H dule H: Your Cod | ebtors | | | 12/15 |
| people ar fill it out, your nam | re filing together, both are eque and number the entries in the ne and case number (if known) | ially responsible for supper boxes on the left. Attach). Answer every question | olying correct informati n the Additional Page to | on. If more space is not this page. On the top | ate as possible. If two married eeded, copy the Additional Page, o of any Additional Pages, write |
| 1. Do | you have any codebtors? (If | you are filing a joint case, | do not list either spouse | as a codebtor. | |
| | 0 | | | | |
| ■ Ye | es | | | | |
| | ithin the last 8 years, have you ona, California, Idaho, Louisiana | | | | / states and territories include |
| ■ N | o. Go to line 3. | | | | |
| _ | es. Did your spouse, former spo | use, or legal equivalent live | e with you at the time? | | |
| in lir Forn | ne 2 again as a codebtor only i | if that person is a guaran | tor or cosigner. Make s | sure you have listed th | g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill |
| | Column 1: Your codebtor Name, Number, Street, City, State and Z | IP Code | | Column 2: The cre Check all schedule | editor to whom you owe the debt st that apply: |
| 3.1 | James B Caldwell 364 Lakeside Road Newburgh, NY 12550 | | | ■ Schedule D, lind Schedule E/F, Schedule G Bayview Loan S | line |
| 3.2 | James B Caldwell 364 Lakeside Road Newburgh, NY 12550 | | | ■ Schedule D, lin □ Schedule E/F, □ Schedule G □ Hudson Valley F | line |

| Fill | in this information to identify your | 2260. | | | | | | | | |
|-------------|--|---|--|---------------------------|------|-----------------------|------------------------|--------------------------|------------------------------|----------|
| | otor 1 Anne T Cal | | | | | | | | | |
| | otor 2 buse, if filing) | | | | _ | | | | | |
| Uni | ted States Bankruptcy Court for the | e: SOUTHERN DISTRIC | CT OF NEW YORK | | | | | | | |
| | se number lown) | | - | | | ☐ Ar | | d filing ent showin | g postpetition | |
| 0 | fficial Form 106I | | | | | MI | M / DD/ Y | YYY | | |
| S | chedule I: Your Inc | ome | | | | | | | | 12/15 |
| spo atta | plying correct information. If you use. If you are separated and yo ch a separate sheet to this form. t1: Describe Employment Fill in your employment | ur spouse is not filing w On the top of any additi | ith you, do not inclu ional pages, write yo | ıde infor | mati | on about d case nu | your spo mber (if l | ouse. If mo known). A | ore space is Answer every | needed, |
| | information. | | Debtor 1 ■ Employed | | | | | | iling spouse | |
| | If you have more than one job, attach a separate page with information about additional | Employment status | | ☐ Employed ☐ Not employed | | | | | | |
| | employers. | Occupation | Registered Nur | se | | | | | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | Columbia Doct | ors | | | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | Monroe, NY 109 | 950 | | | | | | |
| | | How long employed t | here? 4 years | S | | | _ | | | |
| Par | t 2: Give Details About Mo | nthly Income | | | | | | | | |
| | mate monthly income as of the cuse unless you are separated. | date you file this form. If | you have nothing to r | eport for | any | line, write | \$0 in the | space. Inc | clude your noi | n-filing |
| | u or your non-filing spouse have me space, attach a separate sheet to | | ombine the informatio | n for all | empl | oyers for t | hat perso | n on the li | nes below. If | you need |
| | | | | | | For Deb | tor 1 | | btor 2 or ing spouse | |
| 2. | List monthly gross wages, saldeductions). If not paid monthly, | | | 2. | \$ | 5, | 218.00 | \$ | N/A | |
| 3. | Estimate and list monthly over | time pay. | | 3. | +\$ | | 0.00 | +\$ | N/A | |
| 4. | Calculate gross Income. Add I | ine 2 + line 3. | | 4. | \$ | 5,21 | 8.00 | \$ | N/A | |

Official Form 106I Schedule I: Your Income page 1

| Debt | or 1 | Anne T Caldwell | - | С | ase | number (if known) | _ | | | |
|------|---------------|---|------------|----|-----------------|-------------------|-----|--------|---------------------------|-----------------|
| | | | | | For | Debtor 1 | | | ebtor 2 or ling spouse | |
| | Сор | y line 4 here | 4. | | \$ | 5,218.00 | | \$ | N/A | _ |
| 5. | l ist | all payroll deductions: | | | | | | | | |
| 0. | 5a. | Tax, Medicare, and Social Security deductions | 5a. | | \$ | 1 400 00 | | \$ | N/A | |
| | 5a. 5b. | Mandatory contributions for retirement plans | 5b. | | \$ _ | 1,400.00 0.00 | - | \$ | N/A N/A | _ |
| | 5c. | Voluntary contributions for retirement plans | 5c. | | \$ | 0.00 | - | \$ | N/A N/A | |
| | 5d. | Required repayments of retirement fund loans | 5d. | | \$ — | 0.00 | - | \$ | N/A N/A | _ |
| | 5e. | Insurance | 5e. | | _{\$} — | 0.00 | - | \$ | N/A | _ |
| | 5f. | Domestic support obligations | 5f. | | _{\$} — | 0.00 | | \$ | N/A | _ |
| | 5g. | Union dues | 5g. | | <u> </u> | 0.00 | - | \$ | N/A | _ |
| | 5h. | Other deductions. Specify: Medical | 5h. | | \$ _ | 540.00 | - | T | N/A | _ |
| | | | _ | | | | • | . — | | _ |
| 6. | | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | | \$ | 1,940.00 | - | \$ | N/A | _ |
| 7. | Cald | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | , | \$ | 3,278.00 | | \$ | N/A | _ |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a | | \$ | 0.00 | | \$ | N/A | |
| | 8b. | Interest and dividends | 8b | | \$ | 0.00 | | \$ | N/A | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | | \$ | 0.00 | | \$ | N/A | |
| | 8d. | Unemployment compensation | 8d | | \$ | 0.00 | | \$ | N/A | _ |
| | 8e. | Social Security | 8e. | | \$ | 0.00 | | \$ | N/A | |
| | 8f. 8g. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income | 8f. 8g. | | \$ \$ | 0.00 | | \$ | N/A N/A | |
| | 8h. | Other monthly income. Specify: | _ 8h | .+ | \$ | 0.00 | . + | \$ | N/A | |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | | 0.00 | | \$ | N/ | A |
| 10. | Calc | culate monthly income. Add line 7 + line 9. | 10. | \$ | | 3,278.00 + \$ | | | N/A = \$ | 3,278.00 |
| | | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | Ť- | | 5,270.00 | _ | | - | 0,270.00 |
| 11. | Stat Inclu | te all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your friends or relatives. In the contribution of the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your per friends or relatives. | depe | | | | | | nedule J. 11. +\$ | 0.00 |
| 12. | | I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies | | | | | | | 12. \$ | <i>3,278.00</i> |
| 13. | Do y | you expect an increase or decrease within the year after you file this form No. | ? | | | | | | month | ly income |
| | _ | Yes. Explain: | | | | | | | | |

Official Form 106I Schedule I: Your Income page 2

| Fill | in this informa | tion to identify y | our case: | | | | | | | |
|---------|---------------------------------|---------------------------------------|---------------------------------------|---|--|----------------|--|---|--|--|
| Deb | | Anne T Calo | | | | Che | ck if this is: | | | |
| | | Aime i Gaic | i i i i i i i i i i i i i i i i i i i | | | | An amended filing | | | |
| | tor 2 buse, if filing) | | | | | | A supplement show 13 expenses as of | wing postpetition chapter the following date: | | |
| Unit | ed States Bankr | uptcy Court for the | : SOUTH | IERN DISTRICT OF NEW | YORK | MM / DD / YYYY | | | | |
| Cas | e number | | | | | | | | | |
| (If kı | nown) | | | | | | | | | |
| Of | fficial Fo | rm 106J | | | | - | | | | |
| | | J: Your | Exper | ises | | | | 12/15 | | |
| Be info | as complete a | and accurate as | s possible eded, atta | . If two married people ar ich another sheet to this | | | | or supplying correct | | |
| Par | t 1: Descr | ibe Your House | ehold | | | | | | | |
| •• | No. Go to | | | | | | | | | |
| | ☐ Yes. Doe | s Debtor 2 live | in a separ | ate household? | | | | | | |
| | □ N | | | | | | | | | |
| | ЦY | es. Debtor 2 mu | st file Offici | al Form 106J-2, Expenses | for Separate House | ehold of Deb | otor 2. | | | |
| 2. | Do you have | e dependents? | ■ No | | | | | | | |
| | Do not list Do Debtor 2. | ebtor 1 and | ☐ Yes. | Fill out this information for each dependent | Dependent's relat Debtor 1 or Debto | | Dependent's age | Does dependent live with you? | | |
| | Do not state | | | | | | | □ No | | |
| | dependents | names. | | | | | | □ Yes □ No | | |
| | | | | | | | | ☐ Yes | | |
| | | | | | | | | □ No | | |
| | | | | | | | | Yes | | |
| | | | | | | | | □ No | | |
| 3. | Do your exp | enses include | | | - | | | ☐ Yes | | |
| O. | expenses of | f people other to d your depende | :han $_{\square}$ | No Yes | | | | | | |
| Par | | ate Your Ongoi | | | | | | | | |
| exp | | | | uptcy filing date unless y y is filed. If this is a supp | | | | | | |
| | | | | government assistance i | | | | | | |
| | value of such ficial Form 10 | | d have ind | cluded it on <i>Schedule I:</i> \ | our Income | - | Your exp | enses | | |
| 4. | | or home owners and any rent for th | | ses for your residence. I or lot. | nclude first mortgag | e 4. S | \$ | 1,500.00 | | |
| | If not includ | led in line 4: | | | | | | | | |
| | 4a. Real e | estate taxes | | | | 4a. \$ | \$ | 0.00 | | |
| | | rty, homeowner' | s, or renter | 's insurance | | 4b. | · | 0.00 | | |
| | | | | upkeep expenses | | 4c. \$ | · | 0.00 | | |
| _ | | owner's associa | | | ma aquitu la are | 4d. 5 | | 0.00 | | |
| 5. | Additional n | nortgage paym | ents for yo | our residence, such as ho | me equity loans | 5. | | 0.00 | | |

| Debtor 1 Anne T Caldwell | Case number (if known) | |
|--|------------------------|---------------------------|
| 5. Utilities: | | |
| 6a. Electricity, heat, natural gas | 6a. \$ | 350.00 |
| 6b. Water, sewer, garbage collection | 6b. \$ | 0.00 |
| 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. \$ | 75.00 |
| 6d. Other. Specify: | 6d. \$ | 0.00 |
| Food and housekeeping supplies | 7. \$ | 400.00 |
| Childcare and children's education costs | 8. \$ | 0.00 |
| Clothing, laundry, and dry cleaning | 9. \$ | 150.00 |
|). Personal care products and services | 10. \$ | 175.00 |
| . Medical and dental expenses | 11. \$ | |
| Transportation. Include gas, maintenance, bus or train fare. | Π. ψ | 50.00 |
| Do not include car payments. | 12. \$ | 180.00 |
| 3. Entertainment, clubs, recreation, newspapers, magazines, and books | 13. \$ | 150.00 |
| Charitable contributions and religious donations | 14. \$ | 0.00 |
| 5. Insurance. | | |
| Do not include insurance deducted from your pay or included in lines 4 or 20. | _ | |
| 15a. Life insurance | 15a. \$ | 0.00 |
| 15b. Health insurance | 15b. \$ | 0.00 |
| 15c. Vehicle insurance | 15c. \$ | 67.00 |
| 15d. Other insurance. Specify: | 15d. \$ | 0.00 |
| Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. | 40 0 | |
| Specify: | 16. \$ | 0.00 |
| 7. Installment or lease payments: 17a. Car payments for Vehicle 1 | 17a. \$ | 0.00 |
| 17b. Car payments for Vehicle 2 | 17b. \$ | 0.00 |
| 17c. Other. Specify: | 17c. \$ | 0.00 |
| 17d. Other. Specify: | 17d. \$ | 0.00 |
| Your payments of alimony, maintenance, and support that you did not report | · | 0.00 |
| deducted from your pay on line 5, Schedule I, Your Income (Official Form 106) | | 0.00 |
| Other payments you make to support others who do not live with you. | , | 0.00 |
| Specify: | 19. | |
| Other real property expenses not included in lines 4 or 5 of this form or on Sc | hedule I: Your Income. | |
| 20a. Mortgages on other property | 20a. \$ | 0.00 |
| 20b. Real estate taxes | 20b. \$ | 0.00 |
| 20c. Property, homeowner's, or renter's insurance | 20c. \$ | 0.00 |
| 20d. Maintenance, repair, and upkeep expenses | 20d. \$ | 0.00 |
| 20e. Homeowner's association or condominium dues | 20e. \$ | 0.00 |
| Other: Specify: Pet care and maintenance | 21. +\$ | 100.00 |
| 2. Calculate your monthly expenses | | |
| 22a. Add lines 4 through 21. | \$ | 3,197.00 |
| 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | 3,187.00 |
| | | 0.40=00 |
| 22c. Add line 22a and 22b. The result is your monthly expenses. | \$ | 3,197.00 |
| 3. Calculate your monthly net income. | | |
| 23a. Copy line 12 (your combined monthly income) from Schedule I. | 23a. \$ | 3,278.00 |
| 23b. Copy your monthly expenses from line 22c above. | 23b\$ | 3,197.00 |
| | | |
| 23c. Subtract your monthly expenses from your monthly income. | 222 | 81.00 |
| The result is your monthly net income. | 23c. \$ | 61.00 |
| 4. Do you expect an increase or decrease in your expenses within the year after For example, do you expect to finish paying for your car loan within the year or do you expect y modification to the terms of your mortgage? | | ase or decrease because o |
| ■ No. | | |
| T Voc. | | |

| Fill in this | information to identify your | case: | | | |
|-------------------------------|---|--|-------------------------------|------------------------|--|
| Debtor 1 | Anne T Caldwell | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filir | ng) First Name | Middle Name | Last Name | | |
| United Sta | tes Bankruptcy Court for the: | SOUTHERN DISTRIC | CT OF NEW YORK | | |
| Case numb | ber | | | | ☐ Check if this is an amended filing |
| | Form 106Dec ration About a | n Individua | l Debtor's Sc | hedules | 12/15 |
| You must f obtaining r | | ile bankruptcy schedul n connection with a ba | es or amended schedules. | Making a false state | ement, concealing property, or 00, or imprisonment for up to 20 |
| years, or b | otti. 18 0.5.C. 99 152, 1541, | 1519, and 3571. | | | |
| | Sign Below | | | | |
| Did y | ou pay or agree to pay some | one who is NOT an att | orney to help you fill out ba | ankruptcy forms? | |
| I | No | | | | |
| □ ` | Yes. Name of person | | | | kruptcy Petition Preparer's Notice, , and Signature (Official Form 119) |
| | penalty of perjury, I declare ney are true and correct. | that I have read the su | mmary and schedules filed | I with this declaratio | on and |
| X /s | s/ Anne T Caldwell | | X | | |
| A | nne T Caldwell ignature of Debtor 1 | | Signature of [| Debtor 2 | |
| Da | ate April 4, 2017 | | Date | | |

| Fill | in this inforn | nation to identify your | case: | | | |
|-------------|---|---|--|--|---|---|
| | otor 1 | Anne T Caldwell | | | | |
| DCI | 3101 1 | First Name | Middle Name | Last Name | | |
| | otor 2 ouse if, filing) | First Name | Middle Name | Last Name | | |
| Uni | ted States Bar | nkruptcy Court for the: | SOUTHERN DISTRICT | OF NEW YORK | | |
| Cas | se number | | | | | |
| | nown) | | | | | Check if this is an amended filing |
| | | | | | | |
| | ficial Fo | | | | | |
| Sta | atement | of Financial A | Affairs for Indiv | iduals Filing for B | Bankruptcy | 4/10 |
| info num | rmation. If m | ore space is needed, a n). Answer every ques | attach a separate sheet t tion. | e are filing together, both are o this form. On the top of an | | |
| | | | ital Status and Where Yo | ou Lived Before | | |
| 1. | wnat is you | r current marital status | Sf | | | |
| | ■ Married■ Not mar | ried | | | | |
| 2. | During the la | ast 3 years, have you l | ived anywhere other tha | n where you live now? | | |
| | □ No ■ Yes. Lis | t all of the places you liv | ved in the last 3 years. Do | not include where you live nov | v. | |
| | Debtor 1 Pr | ior Address: | Dates Debtor lived there | 1 Debtor 2 Prior Ac | ldress: | Dates Debtor 2 lived there |
| | 363 CR 49 Middletow | vn, NY 10940 | From-To: <i>Until 2016.</i> | ☐ Same as Debtor | 1 | ☐ Same as Debtor 1 From-To: |
| 3. state | No Yes. Ma Explai Did you have Fill in the tota | n the Sources of Your and amount of income you amount of income you | fornia, Idaho, Louisiana, Nedule H: Your Codebtors (Income ployment or from operatoreceived from all jobs and | ting a business during this you | ico, Texas, Washington and ear or the two previous cal time activities. | Wisconsin.) |
| | If you are filing | ng a joint case and you h | nave income that you rece | ive together, list it only once u | nder Debtor 1. | |
| | ☐ Yes. Fill | in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |

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| 5. | Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. | | | | | | | | | | |
|----|--|---|--|--|--|--|--|---|--|--|---------------|
| | List each | source and t | he gross inco | me from ea | ach source separa | tely. Do | not include income | that you listed in lir | ne 4. | | |
| | ■ No □ Yes. | Fill in the de | etails. | | | | | | | | |
| | | | | Debtor 1 | | | | Debtor 2 | | | |
| | | | | | of income below. | each (befo | s income from source re deductions and sions) | Sources of inc Describe below | | Gross incon (before dedu and exclusion | ctions |
| Pa | rt 3: Lis | t Certain Pa | yments You | Made Befo | ore You Filed for | Bankrup | otcy | | | | |
| 3. | □ No. | Neither De individual puring the No. Yes * Subject | 90 days befo Go to line 7. List below e paid that cre not include of to adjustment or Debtor 2 of 90 days befo Go to line 7. List below e include payrattorney for | ebtor 2 ha personal, f re you filed ach creditor editor. Do n payments t on 4/01/19 r both have re you filed ach creditor ach creditor | amily, or househout for bankruptcy, do for to whom you parent include payment of an attorney for to an attorney for to and every 3 year e primarily consult for bankruptcy, do for to whom you parent composition | umer de old purpos id you pa id a total nts for do his bank rs after th umer del id you pa id a total ibligation | of \$6,425* or more objective support obliques to cases. | al of \$6,425* or mo in one or more pay gations, such as character the date of \$600 or more? | re? /ments and the support and support an | he total amount and alimony. Als t creditor. Do no | you oo, do |
| | O. Gailto. | o manio ani | a 7 (da) 000 | | Dates of payme | | paid | still owe | True time p | ouyo | |
| 7. | Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporat of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. | | | | | | | g one fo | | | |
| | | Name and | | | Dates of payme | ent | Total amount | Amount you | Reason fo | or this payment | t |
| 3. | insider? Include pa | ayments on o | | eed or cosi | r y, did you make gned by an inside | | paid ments or transfer a | still owe | ccount of a | debt that bene | fited an |
| | Insider's | Name and | Address | | Dates of payme | ent | Total amount paid | Amount you still owe | | or this payment editor's name | t |
| | | | | | | | paid | 2 0 0 | | | |

Pg 33 of 44 Case number (if known) Debtor 1 Anne T Caldwell Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Case title Nature of the case Status of the case Court or agency Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Date Value of the property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ☐ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value per person the gifts Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value contributed more than \$600 **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

No

Yes. Fill in the details.

Describe the property you lost and Describe any insurance coverage for the loss how the loss occurred Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.

Date of your loss

Value of property lost

Debtor 1 Anne T Caldwell Pg 34 of 44

Case number (if known)

| Par | 7: List Certain Payments or Transfers | | | | | | | | | |
|-----|--|--|---|-----------------|--|---|--|--|--|--|
| 16. | Within 1 year before you filed for bankruptc consulted about seeking bankruptcy or prepinclude any attorneys, bankruptcy petition prep | paring a bankruptcy pe | tition? | | | rty to anyone you | | | | |
| | □ No | | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You | Description and transferred | value of any prope | erty | Date payment or transfer was made | Amount of payment | | | | |
| | Greher Law Offices, P.C. 1161 Little Britain Road Suite B New Windsor, NY 12553 warrengreher@hvc.rr.com | Attorney Fees | | | | \$2,190.00 | | | | |
| 17. | Within 1 year before you filed for bankruptcy promised to help you deal with your credito Do not include any payment or transfer that you | rs or to make payment | | | r transfer any prope | rty to anyone who | | | | |
| | NoYes. Fill in the details. | | | | | | | | | |
| | Person Who Was Paid Address | Description and transferred | Description and value of any property transferred | | | Amount of payment | | | | |
| 18. | Within 2 years before you filed for bankrupt transferred in the ordinary course of your be include both outright transfers and transfers mainclude gifts and transfers that you have alread No Yes. Fill in the details. | usiness or financial aff ade as security (such as | airs? the granting of a se | | | | | | | |
| | Person Who Received Transfer Address Person's relationship to you | Description and property transfer | | | any property or received or debts change | Date transfer was made | | | | |
| 19. | Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro ■ No | | ny property to a se | elf-settled tru | st or similar device | of which you are a | | | | |
| | ☐ Yes. Fill in the details. | | | | | | | | | |
| | Name of trust | Description and | Description and value of the property transferred | | | | | | | |
| Par | 8: List of Certain Financial Accounts, Ins | struments, Safe Deposi | t Boxes, and Stora | age Units | | | | | | |
| 20. | Within 1 year before you filed for bankrupto; sold, moved, or transferred? Include checking, savings, money market, ohouses, pension funds, cooperatives, associ | r other financial accou | nts; certificates of | | | , , | | | | |
| | ■ No | | | | | | | | | |
| | Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number | Type of account instrument | clo mo | te account was sed, sold, ved, or | Last balance before closing or transfer | | | | |

Debtor 1 Anne T Caldwell Case number (if known)

| 21. | 1. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? | | | | | | |
|-----|---|--|---------------------------------------|-----------------------|--|--|--|
| | ■ No | | | | | | |
| | Yes. Fill in the details. | | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had access to it? Address (Number, Street, City, State and ZIP Code) | Describe the contents | Do you still have it? | | | |
| 22. | Have you stored property in a storage unit or p | place other than your home within 1 | year before you filed for bankruptcy | ? | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) | Describe the contents | Do you still have it? | | | |
| Par | 19: Identify Property You Hold or Control for | r Someone Else | | | | | |
| 23. | Do you hold or control any property that some for someone. | one else owns? Include any propert | y you borrowed from, are storing for | , or hold in trust | | | |
| | ■ No | | | | | | |
| | ☐ Yes. Fill in the details. | | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the property? (Number, Street, City, State and ZIP Code) | Describe the property | Value | | | |
| Par | t 10: Give Details About Environmental Inform | nation | | | | | |
| For | the purpose of Part 10, the following definitions | s apply: | | | | | |
| | Environmental law means any federal, state, o toxic substances, wastes, or material into the regulations controlling the cleanup of these su | air, land, soil, surface water, ground | | | | | |
| | Site means any location, facility, or property as to own, operate, or utilize it, including disposa | - | aw, whether you now own, operate, o | or utilize it or used | | | |
| | Hazardous material means anything an environ hazardous material, pollutant, contaminant, or | | waste, hazardous substance, toxic s | substance, | | | |
| Rep | ort all notices, releases, and proceedings that y | you know about, regardless of when | they occurred. | | | | |
| 24. | Has any governmental unit notified you that yo | ou may be liable or potentially liable | under or in violation of an environme | ental law? | | | |
| | ■ No | | | | | | |
| | ☐ Yes. Fill in the details. | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | | | |
| 25. | Have you notified any governmental unit of an | y release of hazardous material? | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | | | |
| | | • | | | | | |

Pg 36 of 44 Case number (if known) Debtor 1 Anne T Caldwell 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. **Case Title** Nature of the case Status of the Court or agency **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) ■ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Anne T Caldwell Anne T Caldwell Signature of Debtor 2 Signature of Debtor 1 Date April 4, 2017 **Date** Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

Doc 1 Filed 04/04/17 Entered 04/04/17 09:48:33

Main Document

☐ Yes. Name of Person

. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

17-35538-cgm

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Southern District of New York

| In re | Anne T Caldwell | | Case No. | |
|----------|---|--|---|---|
| | | Debtor(s) | Chapter | 13 |
| | DISCLOSURE OF C | COMPENSATION OF ATTOR | RNEY FOR DE | EBTOR(S) |
| C | ursuant to 11 U.S.C. § 329(a) and Fed. Ban ompensation paid to me within one year beferendered on behalf of the debtor(s) in cont | fore the filing of the petition in bankruptcy, | or agreed to be paid | to me, for services rendered or to |
| | For legal services, I have agreed to acce | ept | <u> </u> | 3,690.00 |
| | | ve received | | 2,190.00 |
| | | | | 1,500.00 |
| 2. \$ | 310.00 of the filing fee has been paid. | | | |
| 3. T | he source of the compensation paid to me w | vas: | | |
| | ■ Debtor □ Other (specify): | | | |
| 4. T | he source of compensation to be paid to me | e is: | | |
| | ☐ Debtor ☐ Other (specify): | To be paid through debtor's Plan | ı . | |
| 5. | I have not agreed to share the above-disc | closed compensation with any other person | unless they are meml | bers and associates of my law firm. |
| | ☐ I have agreed to share the above-disclose copy of the agreement, together with a list | ed compensation with a person or persons w st of the names of the people sharing in the | | |
| 6. I | n return for the above-disclosed fee, I have a | agreed to render legal service for all aspects | s of the bankruptcy c | ase, including: |
| b. c. | | nedules, statement of affairs and plan which | may be required; and any adjourned hear | rings thereof; tions as needed; preparation |
| 7. B | | disclosed fee does not include the following in any dischargeability actions, loss ances, relief from stay actions or any | mitigation, motion | |
| | | CERTIFICATION | | |
| | certify that the foregoing is a complete state inkruptcy proceeding. | ement of any agreement or arrangement for | payment to me for re | epresentation of the debtor(s) in |
| | oril 4, 2017 | /s/ Warren Grehei | | |
| Da | te | Warren Greher 71 Signature of Attorne Greher Law Office 1161 Little Britain Suite B New Windsor, NY 845-567-1002 Fa. warrengreher@hy | y es, P.C. n Road ' 12553 x: 845-567-0025 | |
| | | Name of law firm | 70.11.00III | |

United States Bankruptcy Court Southern District of New York

| In re | Anne T Caldwell | Dobtor(s) | Case No. | 12 | |
|---------|------------------------------------|--|--------------------|-----------------------|--|
| | | Debtor(s) | Chapter | _ 13 | |
| | VERI | MATRIX | | | |
| Γhe abo | ove-named Debtor hereby verifies t | that the attached list of creditors is true and co | orrect to the best | of his/her knowledge. | |
| Date: | April 4, 2017 | /s/ Anne T Caldwell | | | |
| | | Anne T Caldwell | | | |

Signature of Debtor

BAYVIEW LOAN SERVICING LLC ATTN MANAGING MEMBER 4425 PONCE DE LEON BLVD - 5TH FL MIAMI, FL 33146

CAPITAL MANAGEMENT SERVICES, LP ATTN PRESIDENT 698 1/2 SOUTH OGDEN STREET BUFFALO, NY 14206-2317

CELLCO PARTNERSHIP ATTN PRESIDENT 1 VERIZON WAY BASKING RIDGE, NJ 07920

DISCOVER BANK ATTN PRESIDENT 6500 NEW ALBANY ROAD NEW ALBANY, OH 43054-3008

FIRST HAWAIIAN BANK ATTN PRESIDENT 999 BISHOP ST HONOLULU, HI 96813

HUDSON VALLEY FCU ATTN PRESIDENT 137 BOARDMAN ROAD POUGHKEEPSIE, NY 12603

INTEGRATED MED PROFESSIONALS ATTN PRESIDENT 532 BROADHOLLOW RD - STE 142 MELVILLE, NY 11747

JAMES B CALDWELL 364 LAKESIDE ROAD NEWBURGH, NY 12550

JEFFERSON CAPITAL SYSTEMS LLC PO BOX 23051 COLUMBUS, GA 31902

PROFESSIONAL CLAIMS BUREAU INC. ATTN PRESIDENT 439 OAK STREET GARDEN CITY, NY 11530

VERIZON WIRELESS ATTN: PRESIDENT 133 CALKINS ROAD ROCHESTER, NY 14623

WESTCHESTER ANESTHESIOLOGISTS ATTN PRESIDENT 800 WESTCHESTER AVE S-614 PORT CHESTER, NY 10573-1354

WHITE PLAINS HOSPITAL ATTN PRESIDENT 41 E POST ROAD WHITE PLAINS, NY 10601